



ATTORNEY DOCKET NO. 19141.0016U2

PATENT

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#4**DECLARATION AND POWER OF ATTORNEY
FOR PATENT APPLICATION** Original Supplemental Substitute PCT

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am an original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled "**Integrated Tissue Poration, Fluid Harvesting**", which is described and claimed in the specification

(check one) which is attached hereto, or
 which was filed on **February 21, 2002** as United States Application No. **10/084,763** and with amendments through **if applicable**), or
 in International Application No. PCT/, filed , and as amended on **if applicable**.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose all information known by me to be material to the patentability of the claims of this application in accordance with Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119 (a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed:

PRIOR FOREIGN APPLICATIONS: (ENTER BELOW IF APPLICABLE)			PRIORITY CLAIMED (MARK APPROPRIATE BOX BELOW)	
APP. NUMBER	COUNTRY	DAY/MONTH/YEAR FILED	YES	NO

ATTORNEY DOCKET NO. 19141.0016U2
SERIAL NO. 10/084,763

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below.

APPLICATION NUMBER	FILING DATE
60/008,043	October 30, 1995
60/077,135	March 6, 1998

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose all information known by me to be material to the patentability of the claims of this application as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

APPLICATION SERIAL NO.	FILING DATE	STATUS (MARK APPROPRIATE COLUMN BELOW)		
		PATENTED	PENDING	ABANDONED
09/570,334	May 16, 2000			
09/208,166	December 9, 1998			
08/776,863	September 5, 1997	5,885,211		
08/520,547	August 29, 1995			
08/152,442	November 15, 1993			
08/152,174	December 8, 1993	5,445,611		
09/263,464	March 5, 1999			

I hereby appoint the following attorneys and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:



23859

PATENT TRADEMARK OFFICE

ATTORNEY DOCKET NO. 19141.0016U2
SERIAL NO. 10/084,763

Address all telephone calls to William R. Johnson at telephone no. (404) 688-0770.

Address all correspondence to:

William R. Johnson
NEEDLE & ROSENBERG, P.C.
Suite 1200, The Candler Building
127 Peachtree Street, N.E.
Atlanta, Georgia 30303-1811

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of first inventor: Jonathan A. Eppstein

Inventor's signature:

Date: 4-18-02

Residence:

~~2844 Jasmine Court~~

Post Office Address:

~~Atlanta, Georgia 30345~~

Citizenship:

USA

Full name of second inventor: **Mark A. Samuels**

Inventor's signature:

Date:

Residence: 4400 Missendell Lane

Post Office Address: Norcross, Georgia 30092

Citizenship: USA



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Inventor's signature: _____ Date: _____

Residence: 2844 Jasmine Court

Post Office Address: Atlanta, Georgia 30345

Citizenship: USA

Full name of second inventor: Mark A. Samuels

Inventor's signature: _____ Date: 4/17/02

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Full name of third inventor: **Michael R. Hatch**

Inventor's signature: Michael R Hatch Date: 4/18/02

Residence: 131 Price Hills Trail

Post Office Address: Sugar Hill, Georgia 30518

Citizenship: USA

Full name of fourth inventor: **Defei Yang**

Inventor's signature: _____ Date: _____

Residence: _____

Post Office Address: _____

Citizenship: _____



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Full name of third inventor: Michael R. Hatch

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Inventor's signature: _____ Date: _____

Residence: 131 Price Hills Trail

Post Office Address: Sugar Hill, Georgia 30518

Citizenship: USA

↑
Full name of fourth inventor: Dafei Yang

Inventor's signature: Dafei Yang Date: April 26, 2002

Residence: 3600 Fieldstone Crossing

Post Office Address: Alpharetta, GA 30005-3801

Citizenship: _____

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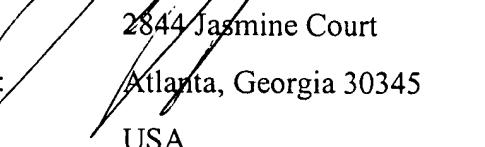
William R. Johnson
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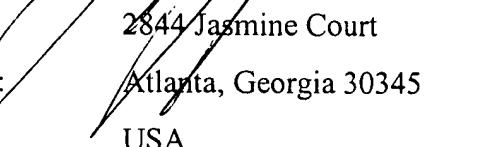
Full name of first inventor: **Jonathan A. Eppstein**

Inventor's signature: 

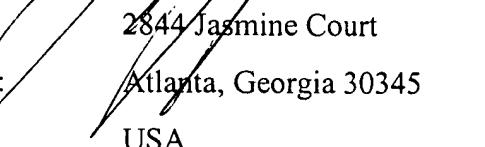
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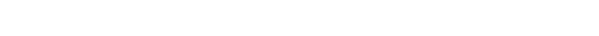
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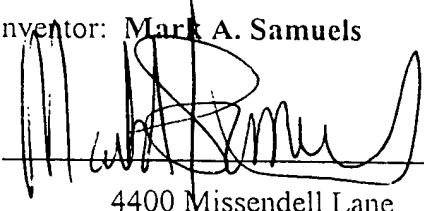
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Citizenship: USA

Full name of third inventor: **Michael R. Hatch**

Inventor's signature: Michael R Hatch Date: 4/18/02

Residence: 131 Price Hills Trail

Post Office Address: Sugar Hill, Georgia 30518

Citizenship: USA

Full name of fourth inventor: **Defei Yang**

Inventor's signature: _____ Date: _____

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Post Office Address: _____

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